



RCE ✓

PTO/SB/30 (01-08)

Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Request for Continued Examination (RCE) Transmittal Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/551,403-Conf. #4461
	Filing Date	September 29, 2005
	First Named Inventor	Goro Shiraishi
	Art Unit	2837
	Examiner Name	A. R. Millikin
	Attorney Docket Number	S1459.70086US00

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.
 Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. Submission required under 37 CFR 1.114		Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).							
a. <input checked="" type="checkbox"/> Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. <table border="0" style="width: 100%;"> <tr> <td>i. <input checked="" type="checkbox"/> Consider the arguments in the Amendment previously filed on</td> <td style="text-align: right;"><u>June 25, 2008</u></td> </tr> <tr> <td>ii. <input type="checkbox"/> Other _____</td> <td></td> </tr> </table>				i. <input checked="" type="checkbox"/> Consider the arguments in the Amendment previously filed on	<u>June 25, 2008</u>	ii. <input type="checkbox"/> Other _____			
i. <input checked="" type="checkbox"/> Consider the arguments in the Amendment previously filed on	<u>June 25, 2008</u>								
ii. <input type="checkbox"/> Other _____									
b. <input type="checkbox"/> Enclosed <table border="0" style="width: 100%;"> <tr> <td>i. <input type="checkbox"/> Amendment/Reply</td> <td>iii. <input type="checkbox"/> Information Disclosure Statement (IDS)</td> </tr> <tr> <td>ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)</td> <td>iv. <input type="checkbox"/> Other _____</td> </tr> </table>				i. <input type="checkbox"/> Amendment/Reply	iii. <input type="checkbox"/> Information Disclosure Statement (IDS)	ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)	iv. <input type="checkbox"/> Other _____		
i. <input type="checkbox"/> Amendment/Reply	iii. <input type="checkbox"/> Information Disclosure Statement (IDS)								
ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)	iv. <input type="checkbox"/> Other _____								
2. Miscellaneous									
a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)									
b. <input type="checkbox"/> Other _____									
3. Fees									
a. <input type="checkbox"/> The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. <u>23/2825</u> . I have enclosed a duplicate copy of this sheet. <table border="0" style="width: 100%;"> <tr> <td>i. <input checked="" type="checkbox"/> RCE fee required under 37 CFR 1.17(e)</td> <td style="text-align: right;"><u>07/24/2008 HAL133 00000001 10551403</u></td> </tr> <tr> <td>ii. <input type="checkbox"/> Extension of time fee (37 CFR 1.136 and 1.17)</td> <td style="text-align: right;"><u>01 FC:1801 810.00 OP</u></td> </tr> <tr> <td>iii. <input type="checkbox"/> Other _____</td> <td></td> </tr> </table>				i. <input checked="" type="checkbox"/> RCE fee required under 37 CFR 1.17(e)	<u>07/24/2008 HAL133 00000001 10551403</u>	ii. <input type="checkbox"/> Extension of time fee (37 CFR 1.136 and 1.17)	<u>01 FC:1801 810.00 OP</u>	iii. <input type="checkbox"/> Other _____	
i. <input checked="" type="checkbox"/> RCE fee required under 37 CFR 1.17(e)	<u>07/24/2008 HAL133 00000001 10551403</u>								
ii. <input type="checkbox"/> Extension of time fee (37 CFR 1.136 and 1.17)	<u>01 FC:1801 810.00 OP</u>								
iii. <input type="checkbox"/> Other _____									
b. <input checked="" type="checkbox"/> Check in the amount of \$ <u>810.00</u> enclosed									
c. <input type="checkbox"/> Payment by credit card (Form PTO-2038 enclosed)									

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Signature	<u>Randy J. Pritzker</u>	Date	<u>7-22-08</u>
Name (Print/Type)	Randy J. Pritzker	Registration No.	35,986

Certificate of Mailing Under 37 CFR 1.8(a)	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Dated: <u>7/22/08</u>	Signature: <u>Jenelle (Jenelle)</u>



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	810.00
-------------------------	------	--------

Complete if Known

Application Number	10/551,403-Conf. #4461
Filing Date	September 29, 2005
First Named Inventor	Goro Shiraishi
Examiner Name	A. R. Millikin
Art Unit	2837
Attorney Docket No.	S1459.70086US00

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>
Each independent claim over 3 (including Reissues)	50	25
Multiple dependent claims	210	105

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
- =	x	=		<u>Fee (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- =	x	=			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ... 810.00

SUBMITTED BY				
Signature	<u>Randy J. Pritzker</u>	Registration No. (Attorney/Agent)	35,986	Telephone
Name (Print/Type)	Randy J. Pritzker	Date	7-22-08	

Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: 7/22/08Signature: Jewell Lee (Ten Lewis)